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starting with: PROTEIN\$(PROTEIN-INJECTED).P29-P91.

Search Results -

Terms	Documents
L5 same protein\$	56

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Search:

L6

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side by side

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<u>L6</u>	L5 same protein\$	56	<u>L6</u>
<u>L5</u>	L1 same diagnos\$	159	<u>L5</u>
<u>L4</u>	L3 same nucleic	1	<u>L4</u>
<u>L3</u>	L1 same marker	23	<u>L3</u>
<u>L2</u>	L1 same marker same protein	1	<u>L2</u>
<u>L1</u>	prostat\$ near0 hypertrophy	1597	<u>L1</u>

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L6: Entry 54 of 56

File: USPT

Jul 14, 1998

DOCUMENT-IDENTIFIER: US 5780286 A

TITLE: Arginase II

Detailed Description Paragraph Right (149):

The present invention also relates to a diagnostic assays such as quantitative and diagnostic assays for detecting levels of Arginase II protein in cells and tissues, including determination of normal and abnormal levels. Thus, for instance, a diagnostic assay in accordance with the invention for detecting over-expression of Arginase II protein compared to normal control tissue samples may be used to detect the presence of urea cycle diseases, hypertension, hypotension, episodic hyperammonemia, defects in biosynthesis of proline, glutamate, nitric oxide and ornithine, as well as hyperargininemia and its related spasticity, growth retardation, and progressive mental impairment, and prostate disease, particularly prostate cancer, prostatitis and benign prostatic hyperplasia or hypertrophy, and also prostate damage, kidney disease, and kidney damage, for example. Assay techniques that can be used to determine levels of a protein, such as an Arginase II protein of the present invention, in a sample derived from a host are well-known to those of skill in the art. Such assay methods include radioimmunoassays, competitive-binding assays, Western Blot analysis and ELISA assays. Preferred samples to be assayed using these assays, include, but are not limited to cells, tissues and bodily fluids. Among these ELISAs frequently are preferred. An ELISA assay initially comprises preparing an antibody specific to Arginase II, preferably a monoclonal antibody. In addition a reporter antibody generally is prepared which binds to the monoclonal antibody. The reporter antibody is attached a detectable reagent such as radioactive, fluorescent or enzymatic reagent, in this example horseradish peroxidase enzyme.

dict
102(a) ↓
prostate hypertrophy
for lack of entry

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L6: Entry 5 of 56

File: USPT

Oct 30, 2001

DOCUMENT-IDENTIFIER: US 6309854 B1

TITLE: Polynucleotides encoding ligands of the neuropeptide receptor HFGAN72

Detailed Description Paragraph Right (39):

In one embodiment, the present invention relates to diagnostic assays including both qualitative and quantitative assays for detecting levels of HFGAN72 receptor ligands in cells, tissues, and biological fluids, including determination of normal and abnormal levels. Thus, for instance, a diagnostic assay in accordance with the invention for detecting over- or under-expression of the HFGAN72 receptor ligands compared to normal control tissue samples may be used to detect a susceptibility to a disease or disorder, including, but not limited to, infections such as bacterial, fungal, protozoan and viral infections, particularly infections caused by HIV-1 or HIV-2; pain; cancers; anorexia nervosa; bulimia; cachexia; obesity; diabetes; asthma; Parkinson's disease; both acute and congestive heart failure; hypotension; hypertension; urinary retention; osteoporosis; angina pectoris; myocardial infarction; ulcers; asthma; allergies; benign prostatic hypertrophy; chronic renal failure; renal disease; impaired glucose tolerance; sexual dysfunction and psychotic and neurological disorders, including anxiety, schizophrenia, manic depression, delirium, dementia, severe mental retardation and dyskinesias, such as Huntington's disease or Gilles de la Tourette's syndrome, among others. Assay techniques that can be used to determine levels of a protein, such as HFGAN72 receptor ligands of the present invention, in a sample derived from a host are well-known to those of skill in the art. Such assay methods include radioimmunoassays, competitive-binding assays, Western Blot analysis and enzyme linked immunosorbent assays (ELISA). Among these, ELISAs are frequently preferred. An ELISA assay initially comprises preparing an antibody specific to an HFGAN72 receptor ligand, preferably a monoclonal antibody. In addition a reporter antibody generally is prepared which binds to the monoclonal antibody. The reporter antibody is attached to a detectable reagent such as radioactive, fluorescent or enzymatic reagent.

157(e)

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L6: Entry 53 of 56

File: USPT

Oct 13, 1998

DOCUMENT-IDENTIFIER: US 5821070 A

TITLE: Antibodies reactive with retinoblastoma binding proteins and methods of using same

Detailed Description Paragraph Right (23):

RbAp clones 2, 4, 8, 10, 12, and 15 are targets for RB, p110.sup.RB, binding and all function in cell cycle control. It is possible that the retinoblastoma-associated proteins encoded by the RbAp clones are positive elements for cell proliferation. Rb binds to the protein products of these clones and, therefore, inhibits their proliferative function. As a result, the RbAp protein products cannot function positively and, therefore, are unable to promote cell cycle progression. Alterations in the RbAp ability to bind RB can result in an oncogenic effect. Assays detecting such alterations and/or mutations could determine malignancy and function as diagnostic tools for hyperproliferative diseases. Examples of hyperproliferative pathologies include, but are not limited to thyroid hyperplasia, psoriasis, Li-Fraumeni syndrome including breast cancer, sarcomas and other neoplasms, bladder cancer, colon cancer, lung cancer, benign prostatic hypertrophy and various leukemias and lymphomas. The present invention also provides antagonists of such altered and/or mutated RbAps for use in therapeutics for cancer and other hyperproliferative pathologies.

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L6: Entry 8 of 56

File: USPT

Apr 24, 2001

DOCUMENT-IDENTIFIER: US 6221627 B1

TITLE: cDNA clone HDPBI30 that encodes a novel human 7-transmembrane receptor

Detailed Description Paragraph Right (37):

In addition, infections such as bacterial, fungal, protozoan and viral infections, particularly infections caused by HIV-1 or HIV-2; pain; cancers; anorexia; bulimia; asthma; Parkinson's disease; acute heart failure; hypotension; hypertension; urinary retention; osteoporosis; angina pectoris; myocardial infarction; ulcers; asthma; allergies; benign prostatic hypertrophy; and psychotic and neurological disorders, including anxiety, schizophrenia, manic depression, delirium, dementia, severe mental retardation and dyskinesias, such as Huntington's disease or Gilles de la Tourette's syndrome, can be diagnosed by methods comprising determining from a sample derived from a subject an abnormally decreased or increased level of HDPBI30 polypeptide or HDPBI30 mRNA. Decreased or increased expression can be measured at the RNA level using any of the methods well known in the art for the quantitation of polynucleotides, such as, for example, PCR, RT-PCR, RNase protection, Northern blotting and other hybridization methods. Assay techniques that can be used to determine levels of a protein, such as an HDPBI30, in a sample derived from a host are well-known to those of skill in the art. Such assay methods include radioimmunoassays, competitive-binding assays, Western Blot analysis and ELISA assays.

152(e)